10/09/2004 13:45 +33-4-73108696

> 033818-099 Attorney Docket No.

## COMBINED DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is

DIENE RUBBER COMPOSITION	I FOR TIRES COMPRISING REINFORCING FILLER	G A SPECIFIC SILICA AS A
the specification of which (check only one its	em below):	
is attached hereto, and was amende	ed on	(if applicable).
was filed as United States application	on number 10/777,075 or	n February 13, 2004
and was amended on	(if applicable).	
☐ was filed as PCT international applic	ation number	on
and was amended on	(if applicable).	
I hereby state that I have reviewed and under the daims, as amended by any amendment	erstand the contents of the a referred to above.	above-identified specification, includir
I acknowledge the duty to disclose to the Of defined in Title 37, Code of Federal Regulat	fice all information known to lons, §1.56.	o me to be material to patentability as
I hereby claim foreign priority benefits under	Title 35, United States Coo	de, §§119 (a)-(d), 172 or 365(a) of an

foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

COUNTRY (If PCT, Indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (MM/DD/YYYY)	PRIORITY CLAIMED UNDE 35 U.S.C. §§119, 172 or 365
FRANCE	01/10871	08/13/2001	¥Yes □No
PCT/EP	02/09069	08/13/2002	☐ Yes ☐ No
			☐ Yes ☐ No
			☐ Yes ☐ No
			□ Yes □ No
			☐Yes ☐No
			☐ Yes ☐ No
			☐Yes ☐No

BURNS DOANE

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Application No. 10/777,075
Attorney Docket No. 033818-099

I hereby appoint the attorneys and agent(s) associated with the following PTO Customer Number of Burns, Doane, Swecker & Mathis, L.L.P. to prosecute said application and to transact all business in the Patent and Trademark Office connected therewith and to file, prosecute and to transact all business in connection with international applications directed to said invention:

Customer Number 21839

I hereby declare that all statements made herein of made on information and belief are believed to be to the knowledge that willful false statements and the I both, under Section 1001 of Title 18 of the United S jeopardize the validity of the application or any pater	rue; and further that these st like so made are punishable tates Code and that such wi	atements were made with by fine or imprisonment, or		
NAME OF SOLE OR FIRST INVENTOR				
GIVEN NAME (first and middle (if any))	FAMILY NAME OR SURNAME			
Olivier		DUREL		
INVENTOR'S SIGNATURE		July 12, 2004		
RESIDENCE (City, State & Country)		CITIZENSHIP		
CLERMONT FERRAND, FRANCE		FRANCE		
MAILING ADDRESS (Complete Street Address Including City, 2 RUE CAMILLE DESMOULINS F-63000 CLERMONT-FERRAND, FRANCE	State, Zip & Country)			
NAME OF SECOND INVENTOR				
GIVEN NAME (first and middle (if any))	FAMILY NAME OR SURNA	FAMILY NAME OR SURNAME		
Arnaud		APRA		
INVENTOR'S SIGNATURE Layer		July 21, 2004		
RESIDENCE (City, State & Country) CLERMONT-FERRAND, FRANCE		CITTZENSHIP		
		FRANCE		
MAILING ADDRESS (Complete Street Address including City, 34 RUE NIEL、とれいらせるのであったとのレス F-63100 CLERMONT-FERRAND, FRANCE	State, Zip & Country)			
NAME OF THIRD INVENTOR				
GIVEN NAME (first and middle (if any))  Julien	FAMILY NAME OR SURNA	ME RNANDEZ		
INVENTOR'S SIGNATURE		September 8 iloogy		
RESIDENCE (CRY, Sinte & Country) ANTONY, FRANCE		CITIZENSHIP		
		FRANCE		
MAILING ADDRESS (Complete Street Address including City, S 17 RUE PIERRE VERMEIR F-92160 ANTONY, FRANCE	State, Zip & Country)			

BURNS DOANE

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NAME OF FOURTH INVENTOR		<b>-</b>	
GIVEN NAME (first and middle (if any))  Rémi	FAMILY NAME OR SURNAME VALERO		
INVENTOR'S SIGNATURE	3	eptember 8, 2004	
RESIDENCE (City, State & Country) LYON, FRANCE		CITIZENSHIP FRANCE	
MAILING ADDRESS (Complete Strot Address Including City, State of The JOHN CURIE COTTS SOMEWY PAGE 61390 SATHELLS	a, Zp & Country) REZ ENN DE THU (	Right EUX	
NAME OF FIFTH INVENTOR			
GIVEN NAME (first and middle (if any))	FAMILY NAME OR SURNAME		
INVENTOR'S SIGNATURE	DA	ATE	
RESIDENCE (City, State & Country)		CMZENSHIP	
MAILING ADDRESS (Complete Street Address including City, State NAME OF SIXTH INVENTOR	, Zip & Country)		
GIVEN NAME (first and middle (if any))	FAMILY NAME OR SURNAME		
INVENTOR'S SIGNATURE	DA	TE	
RESIDENCE (City, State & Country)	<u> </u>	CITIZENSHIP	
MAILING ADDRESS (Complete Street Address including City, State	Zip & Country)		
NAME OF SEVENTH INVENTOR			
GIVEN NAME (first and middle (if any))	FAMILY NAME OR SURNAME		
INVENTOR'S SIGNATURE	DA	TE	
RESIDENCE (City, State & Country)		СПІΖЕНІЗНІР	
MAILING ADDRESS (Complete Street Address including City, State,	Zip & Country)		



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